



Bib Data Sheet


**UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office**

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Washington, D.C. 20231

SERIAL NUMBER 09/159,680	FILING DATE 09/24/1998 RULE -	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. -	
APPLICANTS ALAN PATTERSON, BELFAST, GB UNITED KINGDOM; DREW HOLMES, BRYANSFORD, GB UNITED KINGDOM; ** CONTINUING DATA ***** THIS APPLICATION IS A CON OF 08/765,475 04/08/1997 ABN ** FOREIGN APPLICATIONS ***** UNITED KINGDOM 9413873.2 07/09/1994 <div style="text-align: right;">** SMALL ENTITY **</div>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY GB	SHEETS DRAWING -	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
ADDRESS JOHN P SHANNON LANE AITKEN & MCCANN 2600 VIRGINIA AVE NW WASHINGTON, DC 20037					
TITLE LONG-ACTING OXYTETRACYCLINE COMPOSITION					
FILING FEE RECEIVED 395	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

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APPLICANT ALAN PATTERSON, BELFAST, GREAT BRITAIN; DREW HOLMES, BRYANSFORD, GREAT BRITAIN.				
CONTINUING DOMESTIC DATA*** VERIFIED THIS APPLN IS A CON OF 08/765,475 04/08/97 <i>abd</i> WHICH IS A CON OF 08/495,768 08/07/95 DIT 8,716,633 <i>rmg</i>				
371 (NAT'L STAGE) DATA*** VERIFIED <i>Dr</i>				
FOREIGN APPLICATIONS*** VERIFIED GREAT BRITAIN 9413873.2 07/09/94 <i>Dr</i>				
***** SMALL ENTITY *****				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged <i>Dr</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Met after Allowance Examiner's Initials _____ Initials _____	STATE OR COUNTRY GB3	SHEETS DRAWING 0	TOTAL CLAIMS 20 INDEPENDENT CLAIMS 3
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FILING FEE RECEIVED \$395	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	